

Food and Drug Administration



CENTER FOR DEVICES AND RADIOLOGICAL HEALTH MEDICAL DEVICES ADVISORY COMMITTEE **MEETING OF THE DENTAL PRODUCTS PANEL**

Tuesday, 13 July 2004

Hilton Washington DC North Ballroom Salons A and B Gaithersburg, Maryland

BACKGROUND

BioMimetic Pharmaceuticals, Inc., of Franklin, Tennessee, submitted an original Premarket Approval Application (PMA) to the FDA on March 12, 2004, for a device called "GEM 21S." GEM 21S is a beta-tricalcium phosphate (β -TCP) bone void filler that is intended to be combined with Becaplermin, a wound-healing drug, to treat osseous defects resulting from periodontal disease, cystectomy, apicoectomy, deficient alveolar ridges, and tooth extraction. The sponsor states that the β -TCP component serves as a scaffold to guide the three dimensional regeneration of bone in a clinical defect site and that the Becaplermin component, which is added to the β -TCP scaffold, promotes cellular in-growth into the intra-osseous defect and scaffold and revascularization of the wound site.

In accordance with the procedures for review set forth in 21 CFR 814.44, FDA has referred the PMA to the Dental Products Panel of the Medical Devices Advisory Committee for the Panel's recommendation.

PANEL ACTION

At this meeting, the Dental Products Panel will discuss and/or vote on the following:

- ?? Whether the device is approvable, approvable with conditions, or not approvable, and
- ?? The basis for the recommendation above.



U.S. Department of Health and Human Services

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MEETING AGENDA DENTAL PRODUCTS PANEL

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8:00 a.m. **CLOSED SESSION – Dental Devices Branch Updates**

> This portion of the meeting is closed to public participation. The committee will discuss commercial information regarding future device applications.

8:30 a.m. CALL TO ORDER

8:30 - 8:45 a.m. **OPEN SESSION -- Welcome and Introductory Remarks**

?? Dr. Jon B. Suzuki, Chairman

?? Mr. Michael E. Adjodha, Executive Secretary

8:45 - 9:00 a.m. **Open Public Hearing**

> Public attendees, who have contacted the Executive Secretary prior to the meeting, will address the Panel and present information relevant to the agenda. Speakers are asked to state whether or not they have any financial involvement with sponsor of the product(s) being discussed or with their competitors

9:00 - 10:30 a.m. Presentation by the Sponsor – GEM 21S (P040013)

?? Mr. Mark Citron

?? Dr. Samuel E. Lynch

?? Dr. William V. Giannobile

?? Dr. Myron Nevins

?? Dr. Robert Genco

10:30 - 10:45 a.m. **BREAK**

MEETING AGENDA continued

10:45 - 11:45 a.m.	Presentation by the FDA – GEM 21S (P040013)		
	?? Dr. M. Susan Runner, Chief, Dental Devices Branch and Deputy Director, DAGID		
	?? Ms. Angela E. Blackwell, Biomedical Engineer, Dental Devices Branch		
	?? Ms. Judy S. Chen, Statistician, Office of Surveillance and Biometrics		
12:00 - 1:00 p.m.	LUNCH BREAK		
1:00 - 2:45 p.m.	Panel Delibe rations		
2:45 - 3:00 p.m.	BREAK		
3:00 - 3:30 p.m.	Open Public Session		
	This portion of the meeting is open to public observers. Public observers may not participate except at the specific request of the Chairperson.		
3:30 – 3:45 p.m.	Summation		
	?? FDA		
	?? Sponsor		
3:45 - 4:45 p.m.	Panel Recommendation and Vote		
5:00 p.m.	MEETING ADJOURNED		

DENTAL PRODUCTS PANEL

Tuesday, 13 July 2004

CHAIR	EXECUTIVE SECRETARY
Jon B. Suzuki, DDS, PhD, MBA Professor University of Pittsburgh, School of Dental Medicine Pittsburgh, Pennsylvania	Michael E. Adjodha, MChE Department of Health and Human Services Food and Drug Administration Center for Devices and Radiological Health Office of Device Evaluation Division of Anesthesiology, General Hospital, Infection Control, and Dental Devices (DAGID)

PANEL MEMBERS AND CONSULTANTS

Name	Affiliation	Role
Salomon Amar, DDS, PhD	Professor, Periodontology	Voting Member
	Boston University, School of Dental Medicine	
	Boston, Massachusetts	
David L. Cochran, DDS, PhD	Professor and Chairman, Periodontology	Voting Member
	University of Texas, Health Science Center	Non-voting for this meeting
	San Antonio, Texas	
Elizabeth S. Howe	Outreach Coordinator	Consumer Representative
	National Foundation for Ectodermal Dysplasias	Non-voting Member
	Auburn, Washington	
Alison F. Lawton, MBA	Senior Vice President,	Drug Industry
	Genzyme Corporation	Representative
	Cambridge, Massachusetts	Non-voting Member
William J. O'Brien, MS, PhD	Professor, Materials Science	Voting Member
	University of Michigan, School of Dentistry Ann Arbor, Michigan	Non-voting for this meeting
Daniel R. Schechter, JD	General Counsel	Device Industry
	Parkell, Incorporated	Representative
	Farmingdale, New York	Non-voting Member
Inder J. Sharma, PhD	Associate Professor, Biostatistics	Consultant
	Morehouse School of Medicine, Department of Community Health and Preventative Medicine	Deputized to Vote
	Atlanta, Georgia	
Domenick T. Zero, DDS, MS	Professor and Chairman, Preventative Dentistry	Voting Member
	Indiana University, School of Dentistry	
	Indianapolis, Indiana	
John R. Zuniga, PhD, DMD	Professor and Graduate Program Director,	Voting Member
-	Oral Surgery	
	University of North Carolina, School of Dentistry	
	Chapel Hill, North Carolina	

OTHER PARTICIPANTS

FDA

Chiu S. Lin, PhD

Division Director, DAGID

DHHS/FDA/CDRH/ODE

M. Susan Runner, DDS, MA, Captain, USPHS

Deputy Division Director, DAGID and

Chief, Dental Devices Branch

DHHS/FDA/CDRH/ODE

Angela E. Blackwell, MS

Biomedical Engineer

Dental Devices Branch

DHHS/FDA/CDRH/ODE

Robert S. Betz, DDS, Captain, USPHS

Dental Officer

Dental Devices Branch

DHHS/FDA/CDRH/ODE

Judy S. Chen, MS

Mathematical Statistician (Biomedical)

Division of Biostatis tics

DHHS/FDA/CDRH/OSB

Janie G. Fuller, DDS, Captain, USPHS

Dental Officer

Division of Postmarket Surveillance

DHHS/FDA/CDRH/OSB

Kurt Stromberg, MD

Medical Officer

Division of Therapeutic Proteins

DHHS/FDA/CDER/OPS/OBP

SPONSOR

Mark Citron,

Vice President, Regulatory Affairs

BioMimetic Pharmaceuticals, Inc.

Franklin, Tennessee

Samuel E. Lynch, DMD, DMSc

President and CEO

BioMimetic Pharmaceuticals, Inc.

William V. Giannoble, DDS, DMSc

Associate Professor

University of Michigan

Myron Nevins, DDS

Associate Professor

Harvard University

Robert Genco, DDS, PhD

Vice Provost

State University of New York at Buffalo

QUESTIONS FOR PANEL DISCUSSION

- 1. Considering the statistical results, is there a clinically significant benefit from the addition of rhPDGF-BB to β -TCP?
- 2. What impact does relying exclusively on secondary endpoints and retrospective analyses have on the validity of the clinical study?
- 3. Are the following intended uses for the device, proposed by the sponsor, supported by valid scientific evidence¹:
 - ?? periodontal disease,
 - ?? cystectomy,
 - ?? apicoectomy,
 - ?? deficient alveolar ridges, and
 - ?? tooth extraction?

If not, which of these claims is not supported?

- 4. Does the information provided by the sponsor provide a reasonable assurance that the device is safe² under the conditions of use prescribed, recommended, or suggested in the proposed labeling? If not, what information is needed to establish the safety of this device for its intended use?
- 5. Does the information provided by the sponsor provide a reasonable assurance that the device is effective³ under the conditions of use prescribed, recommended, or suggested in the proposed labeling? If not, what information is needed to establish the effectiveness of this device for its intended use?

Well-Controlled Investigations
Partially Controlled Studies
Studies & Objective Trials without Matched Controls
Well-Documented Case Histories by Qualified Experts
Reports of Significant Human Experience with a Marketed Device

¹ Valid scientific evidence includes:

² There is a reasonable assurance that a device is **safe** when it can be determined, based upon valid scientific evidence, that the probable benefits to health from the use of the device for its intended uses and conditions for use, when accompanied by adequate directions and warnings against unsafe use, outweigh any probable risks. The valid scientific evidence used to determine the safety of the device shall adequately demonstrate the absence of unreasonable risk associated with the use of the device for its intended uses and conditions for use.

³ There is a reasonable assurance that a device is **effective** when it can be determined, based upon valid scientific evidence, that in a significant portion of the target population, the use of the device for its intended uses and conditions of use, when accompanied by adequate directions for use and warnings against unsafe use, will provide clinically significant results.